



STATE OF IOWA
MASTER AGREEMENT

MA# 005 CT1105X

EFFECTIVE BEGIN DATE: 09-01-2004
EXPIRATION DATE: 08-31-2005
PAGE: 1 of 3

BUYER : JEANETTE CHUPP
Jeanette.Chupp@iowa.gov
515-281-6288

PAYMENT TERMS (%): DAYS:

VENDOR:

**New Solutions
4321 Alamo St

Riverside, CA 92501
USA**

VENDOR CONTACT:

ROBERT FULTON
PHONE: 909-276-8266 **EXT:**
EMAIL:
VENDOR #: 33053371300

DESCRIPTION OF ITEMS CONTRACTED

WHEELCHAIR REPAIR PARTS

Contract For The Provision And Delivery Of Wheelchair Repair Parts Pursuant To The Specifications, Terms And Conditions Of Sealed Bid Bd70400s011 Dated August 19, 2003, On File With The Department Of Administrative Services, General Services Enterprise, Hoover Building, Level A, Des Moines, Iowa, 50319-0105. Brands Of Parts Available Include: - Invacare - Quickie - Everest & Jennings - Aftermarket Parts Wheelchair Repair Parts Shall Be Supplied At Fifty Percent (50%) Discount From The January 1, 2003, "New Solutions" Catalog Pricing. Additional Contract Terms: A. Orders Which Total \$200 Or More Shall Be Shipped Fob Destination (No Freight Charges Invoiced For Orders Which Total \$200 Or More) B. Parts Shall Be Shipped Within Four (4) Calendar Days After Receipt Of A Purchase Order. C. All Product Returns Shall Be Pre-Authorized By The Vendor. Products Which Are Ordered In Error May Be Returned Within 30 Days After Delivery With No Re-Stocking Fee In The Same Condition In Which They Were Received. D. All Products Which Are Found Defective Within Thirty (30) Calendar Days After Delivery Shall Be Replaced Free-Of-Charge (Or Fully Credited) Upon Return Of The Products With A Written Explanation From The Business Manager At The Receiving Location. E. The 2003 "New Solutions" Catalog Pricing Shall Remain Firm Thru August 31, 2004, And Thereafter Shall Be Subject To Change Annually, Upon Publication Of A New Catalog. Catalogs Shall Be Distributed At No-Charge To Requ

RENEWAL PERIODS REMAINING

1 Years
1 Years

THRESHOLDS

MINIMUM ORDER AMOUNT:
MAXIMUM ORDER AMOUNT:
NOT TO EXCEED AMOUNT:

AUTHORIZED DEPARTMENT

ALL

TOTAL \$0.00

VENDOR:

APPROVED BY:

**THIS MA IS SUBJECT TO THE TERMS AND
CONDITIONS ATTACHED HERETO.
PLEASE SEE ATTACHMENTS FOR
FURTHER DESCRIPTIONS.**



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LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST
1	0.00000		47080	\$0.000000
			Wheelchairs (Including Mobile Treatment Chairs)	
2	0.00000		4708031	\$0.000000
			WHEELCHAIR, CONTINUOUS BELTING AND BRAKE TRACTION SYSTEM	
3	0.00000		4708043	\$0.000000
			CUSHIONS, WHEELCHAIR, LOW HAND HIGH PROFILE	
4	0.00000		475	\$0.000000
			HOSPITAL, SURGICAL, AND MEDICAL RELATED ACCESSORIES AND SUND	
999	0.00000		96286	\$0.000000
			Transportation of Goods and Other Freight Services	
			Freight Charges Shall Not Be Invoiced On Orders Which Total \$200 Or More.	



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TERMS AND CONDITIONS

N30
NET 30 DAYS